

ANNUAL VISUAL ATV SAFETY CHECKLIST

NFC ID#

AG000 _____ LICENSE # _____ LOCATION _____

MAKE _____ MODEL _____ YEAR _____

OK**Yes ✓****No ✓**

Brakes operational		
Clutch operational		
Accelerator operating properly		
Kill switch operating properly		
Head lights work		
Tail lights work		
Steering – sway or drifting		
Horn operational		
Tires		
Instrument panel and controls		
Fenders/Body/Racks		
License plate – back and front		
NRCS Decal		
Check Helmets, Visors, or Goggles for Lost or Damage		
Date of last oil change ____ / ____ / ____		

Current Odometer – Hours/miles (if available)

Assigned Driver _____ Date Completed _____

Signature of Person Conducting Inspection _____

Remarks - (include overall condition of the ATV)
